

**SUMMARY PROCESS (EVICTION)
ANSWER TO COMPLAINT**

JD-HM-5 Rev. 12-16

C.G.S. §§ 47a-4a, 47a-5, 47a-7, 47a-20, 47a-20e, 47a-23c, 47a-33, 47a-57, 49-31p

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

Docket number

19-6010565

Return date

7/1/19

Name of Plaintiff(s) (Landlord(s))

Seabury Cooperative Housing

Name of Defendant(s) (Tenant(s))

Terrence R. Ruggins

☐ Judicial District ☒ Housing Session ☐ Geographical Area Number _____ at: _____

Address of Court (Number, street, and town)

400 121 Elm Street New Haven

Section 1 — Summary Process (Eviction) Answer

(This section does not apply to Special Defenses below)

For each numbered paragraph of the landlord's Complaint, please "x" whether you Agree, Disagree or Do Not Know.

- | | | | | | |
|--|--|---|--|-----------------------------------|--------------------------------------|
| 1. Agree <input type="checkbox"/> | Disagree <input type="checkbox"/> | Do Not Know <input checked="" type="checkbox"/> | 5. Agree <input checked="" type="checkbox"/> | Disagree <input type="checkbox"/> | Do Not Know <input type="checkbox"/> |
| 2. Agree <input type="checkbox"/> | Disagree <input checked="" type="checkbox"/> | Do Not Know <input type="checkbox"/> | 6. Agree <input checked="" type="checkbox"/> | Disagree <input type="checkbox"/> | Do Not Know <input type="checkbox"/> |
| 3. Agree <input checked="" type="checkbox"/> | Disagree <input type="checkbox"/> | Do Not Know <input type="checkbox"/> | 7. Agree <input type="checkbox"/> | Disagree <input type="checkbox"/> | Do Not Know <input type="checkbox"/> |
| 4. Agree <input checked="" type="checkbox"/> | Disagree <input type="checkbox"/> | Do Not Know <input type="checkbox"/> | 8. Agree <input type="checkbox"/> | Disagree <input type="checkbox"/> | Do Not Know <input type="checkbox"/> |

Section 2 — Special Defenses (Facts that show the court that the plaintiff has no legal right to what the plaintiff has requested in this case.)

"x" the boxes next to the statements below that apply to you and fill in the information requested.

- a. ☐ All rent has been paid to my landlord.
- b. ☐ Rent was offered to my landlord on (date): _____ which was before the date I received the Notice to Quit.
- c. ☐ No rent is due, under Connecticut Law (section 47a-4a of the Connecticut General Statutes) because there are housing or health code violations in violation of Connecticut Law (Section 47a-7(a) of the Connecticut General Statutes). List violations below.

- d. ☐ I notified ☐ my landlord, ☐ Housing Code, ☐ the Health Department, or ☐ the Building Department of the violations listed in section c above on (date): _____
- e. ☐ This eviction is being brought because I contacted ☐ my landlord or ☐ public officials or agencies to complain about my apartment (Sections 47a-20 and 47a-33 of the Connecticut General Statutes).
- f. ☐ I filed a rent increase complaint with the Fair Rent Commission on (date): _____
- g. ☐ I live in a building or complex with 5 units or more or in a mobile manufactured home park and
☐ I have a physical or mental disability, or
☐ I am 62 years old or older, or
☐ my spouse, sibling, parent or grandparent is 62 years old or older and permanently lives with me, or
☐ my spouse, sibling, parent or grandparent has a physical or mental disability and permanently lives with me.

(Section 47a-23a of the Connecticut General Statutes.)

- h. ☐ (See Notice on back/page 2 of this form) This eviction was brought after a foreclosure action, and
☐ I have a written lease that is still in effect or
☐ I never received a 90 day letter (notice) before the notice to quit was delivered (served).

Additional Information:

I do not know why the eviction was brought.
I expressed intentions to pay balance.
Rent is not \$907.00 it began at \$79.00 Then was increased to \$754.00. No one occupies the apartment other than me.

Defendant's (Tenant's) Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) 7/1/19 to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery.

Name and address of each party and attorney that copy was mailed or delivered to*

Law Offices of Michael Clinton LLC
212 New London Tpk Glastonbury CT 06033

*If necessary, attach additional sheet or sheets with name and address which the copy was mailed or delivered to. (Use form JD-CV-67, Continuation of Parties)

Signed (Individual attorney or self-represented party)

Terrence R. Ruggins

Print or type name of person signing

Terrence R. Ruggins

Mailing address

400 Elm Street # 2F New Haven CT 06511

Telephone number

(203) 850 3708

Distribution:

Original - Court File

Copy 1 - Plaintiff (Landlord) or Attorney

Copy 2 - Defendant (Tenant)

DOCKET NUMBER: 19-6010545

COUNT # 2

1.	<input type="checkbox"/> Agree	<input checked="" type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know
2.	<input type="checkbox"/> Agree	<input checked="" type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know
3.	<input type="checkbox"/> Agree	<input checked="" type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know
4.	<input type="checkbox"/> Agree	<input checked="" type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know
5.	<input type="checkbox"/> Agree	<input checked="" type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know
6.	<input type="checkbox"/> Agree	<input checked="" type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know
7.	<input type="checkbox"/> Agree	<input checked="" type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know
8.	<input type="checkbox"/> Agree	<input checked="" type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know

9 ☒
10 ☒

COUNT #

1.	<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Do Not Know
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COUNT #

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SIGNATURE: Jennie R. Rozgins